

	Plan A	Plan B				Plan C					Plan D				Plan E		Rate Guarantee
CARRIERS	\$250	Copay	\$250	\$500	\$1,000	Copay	\$250	\$500	\$1,000	\$2,500	Copay	\$250	\$500	\$1,000	Copay	\$150	
Aetna Life Insurance Company	\$4,495	n/a	\$7,773	\$7,229	\$6,622	\$10	\$5,080 (1)	\$5,047 (1)	\$5,013 (1)	n/a	\$10	\$5,156 (1)	\$5,079 (1)	\$5,043 (1)	n/a	\$9,347	1 Year
AmeriHealth Insurance Company of New Jersey	\$3,259	n/a	\$6,291	\$5,962	\$5,448	\$30	n/a	n/a	\$3,770 (2)	\$3,594 (2)	\$20	\$4,940 (2)	\$4,768 (2)	\$4,388 (2)	n/a	\$7,922	None
Guardian Life Insurance Company of America	\$5,502	n/a	\$6,075 (2)	\$5,695 (2)	\$5,457 (2)	\$10	\$7,274 (2)	\$6,821 (2)	\$6,545 (2)	n/a	\$10	\$8,192 (2)	\$7,694 (2)	\$7,312 (2)	\$10	\$7,896 (2)	None
Horizon Blue Cross Blue Shield of New Jersey	\$2,795	n/a	\$3,458 (2)	\$3,296 (2)	\$2,903 (2)	n/a	\$3,533 (1)	\$3,334 (1)	\$3,019 (1)	n/a	\$10	\$4,274 (1)	\$3,772 (1)	\$3,459 (1)	n/a	\$6,711	1 Month
Metropolitan/New England Life Insurance Company	\$34,010	n/a	\$55,717	\$48,276	\$41,816	\$10	\$42,873 (2)	\$37,684 (2)	\$31,722 (2)	n/a	\$10	\$39,139 (2)	\$34,607 (2)	\$29,506 (2)	\$10	\$45,056 (2)	None
Nippon Life Insurance Company of America	\$4,021	n/a	\$4,102	\$3,930	\$3,673	n/a	\$4,506	\$4,287	\$3,946	n/a	n/a	\$4,869	\$4,619	\$4,238	n/a	\$5,491	1 Year
Oxford Health Insurance, Inc.	\$3,934	n/a	n/a	n/a	\$3,682 (2)	\$20	\$4,308 (1)	\$3,970 (1)	\$3,874 (1)	n/a	\$20	\$4,479 (1)	\$4,080 (1)	\$3,915 (1)	\$10	\$5,189 (1)	1 Year
Trustmark Insurance Company	\$6,534	n/a	\$6,800 (2)	\$5,930 (2)	\$5,120 (2)	n/a	\$8,202 (2)	\$7,564 (2)	\$6,306 (2)	n/a	n/a	\$9,272 (2)	\$8,346 (2)	\$7,735 (2)	n/a	\$10,701 (2)	None
United HealthCare Insurance Company, Inc.	\$3,573	n/a	\$6,891	\$5,726	\$4,933	n/a	\$4,501 (2)	\$4,205 (2)	\$4,181 (2)	n/a	n/a	\$3,484 (2)	\$2,967 (2)	\$2,610 (2)	n/a	\$10,251	1 Month
WellChoice Insurance of New Jersey	\$3,348	n/a	\$6,607	\$6,134	\$5,321	\$30	\$5,785 (2)	\$5,560 (2)	\$5,289 (2)	\$4,987 (2)	n/a	\$8,040	\$7,397	\$6,318	n/a	\$9,001	1 Year

Note: Rates shown are monthly premiums for the sample group described on the attached page.

Note: Plans A-E may be issued as indemnity, PPO, or POS plans. POS and PPO plans may have different copayment and coinsurance options. Consult the carriers for the available options.

(1) Rates shown are for a POS Plan.

(2) Rates shown are for a PPO Plan.